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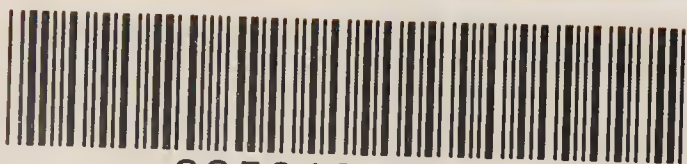
Report of

PHYSICIAN-SUPERINTENDENT



5th July, 1955 to 4th July, 1956

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BELMONT HOSPITAL

Report of Physician-Superintendent

5th July, 1955 to 4th July, 1956

MEDICAL STAFF

PSYCHIATRIC

CONSULTANTS—FULL TIME

Louis Minski, M.D., F.R.C.P., D.P.M. — Physician Superintendent
David Shaw, M.D., M.R.C.P., D.P.M. — Physician Deputy Superintendent
Maxwell Jones, C.B.E., M.D., M.R.C.P. (Ed.), D.P.M.
Physician i/c Social Rehabilitation Unit
A. S. Thorley, M.D., D.P.M. — Physician i/c Male Side
M. N. Pai, M.B., B.S., M.R.C.P., D.C.H., D.P.H., D.T.M., D.P.M.

PART-TIME

W. W. Sargent, M.B., F.R.C.P., D.P.M.
Physician in Psychological Medicine, St. Thomas' Hospital
D. E. Bunbury, M.B., M.R.C.P., D.P.M.
G. R. Debenham, B.Ch., D.P.M.
F. O'Donnell Finigan, M.B., M.R.C.P. (Ed.), D.P.M.

SENIOR HOSPITAL MEDICAL OFFICERS

N. Craske, B.Sc., M.B., Ch.B.
A. Samuel, M.R.C.S., L.R.C.P., D.P.M.
B. Pomryn, M.B., B.S., D.P.M.
David Thomas, B.Sc., M.B., B.Ch., D.P.M.
C. C. Evans, M.A., M.R.C.S., L.R.C.P., D.P.M.
Physician i/c Department of Electro-Physiology

SENIOR REGISTRARS

J. N. McCullough, M.B., Ch.B., D.P.M.
G. F. Spaul, M.B., B.S., D.P.M.

REGISTRARS

J. A. Gorst, M.B., B.S., D.P.M.
B. F. McCarthy, M.Sc., M.B., B.Ch., B.A.O., D.P.M.
F. Stallard, M.B., B.Ch., B.A.O., D.P.M.
L. Tarlo, B.A., M.B., B.Ch., B.A.O., D.P.M.
P. G. Woolf, M.R.C.S., L.R.C.P., D.P.M.
M. E. Yorke-Moore, M.B., B.S., D.OBST., R.C.O.G.

JUNIOR HOSPITAL MEDICAL OFFICER

M. Stewart, M.R.C.S., L.R.C.P.

PART-TIME PSYCHIATRIST

S. Crown, M.R.C.S., L.R.C.P.

GENERAL MEDICAL STAFF

E. M. Foxen, F.R.C.S., D.L.O.	—	Consulting Ear, Nose & Throat Surgeon
A. Feiling, B.A., M.D., F.R.C.P.	—	Consulting Neurologist
R. Gilbert, F.R.C.S.	—	Consulting Surgeon
Wylie McKissock, O.B.E., M.S., F.R.C.S.	—	Consulting Neurosurgeon
R. Niven, M.A., M.B., B.Ch., M.R.C.P.	—	Consulting Physician
R. E. Gibson, M.B., B.S., D.A.	—	Consulting Anæsthetist
P. McGregor Moffatt, M.D., F.R.C.S., M.R.C.P., D.O.M.S.		Consulting Ophthalmologist
Trevor Griffiths, M.B., B.Ch., D.M.R.D.	—	Consulting Radiologist
E. C. F. Wadge, M.R.C.S., L.R.C.P., DIP. PHYS. MED.		Consultant in Physical Medicine
Mrs. Sutcliffe Hey	—	Consulting Dental Surgeon

GENERAL.

The only change among the medical staff during the year has been the appointment of Dr. Woolf as Registrar in place of Dr. Seager who left to take up a Senior Registrar's post at Barrow Hospital, Bristol. During the year, Drs. Gorst and McCarthy obtained the D.P.M. of the Conjoint Board.

I am glad to report that the Ministry of Health has now approved the new Nurses' home mentioned in my last report, and it is hoped that work will begin on this in the near future. As has already been mentioned, this will allow the psychological and occupational departments to be transferred to the old Nurses' home with the consequent release of more beds and sitting room accommodation for patients.

A large new sitting room for female patients and a smaller one for male patients have been provided during the year. These are tastefully decorated and well furnished and are greatly appreciated by patients. The purchase of much of the furniture, together with several new television sets was made possible through the generosity of the King Edward Hospital Fund for London which gave the hospital a grant.

It is hoped in the near future to provide another sitting room for male patients as the present one does not provide sufficient accommodation for their needs. The old barber's shop which was no longer required has been converted into a new male deep insulin unit, while the former deep insulin unit has become a sitting room for male patients.

The dark room in the X-ray department has been renovated and brought up-to-date, while a new processing unit for developing has been provided.

A patients' and visitors' lavatory has been provided near the occupational shops, while some new equipment in the kitchen and laundry have improved these departments considerably. A new mess room for laundry staff has supplied a long felt need.

During the year the usual painting programme has been carried out and the whole of the outside of the hospital, with the exception of one block, and many of the wards have been redecorated.

Heating has also been taken into many side rooms ; this has been made possible as a result of the provision of the new boilers.

On the 29th April a fire broke out in the recreation room attached to the social Rehabilitation Unit. The fire which spread rapidly did considerable damage, but fortunately no one was injured. It is hoped that it will be possible to make good the damage in the near future.

During the year Mrs. Sutcliffe Hey saw 1,463 patients in the dental department and carried out 84 operations for dental extractions under general anæsthesia.

A new Sterling unit has been provided by the Ministry of Health for this department and is greatly appreciated by the dental surgeon.

As before, the general consulting staff visit weekly and also when required in an emergency.

The following numbers of patients were seen by the consulting staff during the year :—

Mr. Gilbert	...	...	...	...	...	...	413
Dr. Niven	...	...	...	...	...	...	307
Mr. Moffatt	...	...	...	...	...	...	186
Mr. Foxen	...	...	...	...	...	...	145
Dr. Feiling	...	...	...	...	...	...	61

During the year 8 major and 14 minor operations were carried out while Mr. McKissock performed 9 leucotomy operations (6 female and 3 male).

Mr. Foxen still performs most of his operations at the Westminster Hospital and gynæcological operations are carried out at St. Helier Hospital.

763 X-ray examinations were carried out during the period under review on 531 patients. These included 328 chests, 90 extremities, 81 spines, 70 barium meals and enemata, 62 skulls, 11 abdomens, 4 intra venous pyelograms, 4 cholecystograms and 2 tomographs. 79 Dental X-rays were also carried out.

During the year 2,494 treatments were given in the physiotherapy department, the commonest forms in use being massage, remedial exercises, heat and light, wax and paraffin baths.

During the period under review, 2,501 examinations were carried out in the hospital laboratory as follows :—

Blood examinations (cell counts, hæmoglobin, etc.)	...	...	...	...	...	1793
Blood sugar and urea estimations	...	...	...	...	...	242
Bacteriological examinations	...	...	...	...	...	172
Sputum examinations	...	...	...	...	...	39
Urine examinations (microscopic and bacteriological)	...	...	...	...	...	189
Test meals	...	...	...	...	...	15
Fæces examinations	...	...	...	...	...	47
C.S.F. examinations	...	...	...	...	...	3
Post mortem examinations	...	...	...	...	...	1
						2501

The laboratory which is staffed by two laboratory technicians is supervised by Dr. Kay, Director of the Central Laboratory at West Park Hospital.

Wasserman and cerebrospinal fluid examinations are carried out at the Central laboratory as a routine together with other complicated biochemical investigations.

ADMISSIONS, DISCHARGES AND DEATHS

ADMISSIONS

During the year 1,312 patients were admitted to the hospital, their categories being as under :—

	Male	Female	Total
Civilian patients	640	621	1261
Ministry of Pensions patients ...	41	—	41
Service patients	10	—	10
	691	621	1312

The admissions are 36 less than in the corresponding period for last year and this is probably accounted for by the reduction of the beds by 20 as mentioned in my previous report. I have also previously stated that in my opinion 1,300 admissions per year is the optimum figure with the present accommodation and staff. The beds are turned over approximately three times a year, but many patients who are doing well under treatment remain in hospital for much longer periods than the average stay of about three months.

As before, the waiting lists for both male and female patients have shown considerable fluctuations, varying from a few days up to six weeks.

The types of illnesses treated differ in little respect from those given in my last report.

DISCHARGES

	Male	Female	Total
Civilian patients	634	634	1268
Ministry of Pensions patients ...	40	—	40
Service patients	10	1	11
	684	635	1319

As in previous years the admissions and discharges have more or less kept pace throughout the year.

DEATHS

Two male patients died from natural causes, while one was killed accidentally while on leave. There were no deaths among female patients.

TREATMENT, OCCUPATIONAL THERAPY, ETC.

Psychiatry like other branches of medicine has its fads and fancies of the moment and at the present time the market is being flooded with tranquillizing agents or “Tranquillizers” as they are referred to.

These are proprietary drugs consisting of two main groups in one of which the active principal is mepbromate and in the other benactyzine. Each bears a different name, and many of them have extremely complicated formulæ, an example of which is 2-methyl-2-n-propyl-1, 3 propanediol dicarbamate.

A number of them have been used and are still in use in this hospital and it would seem that in some of the chronic neurotic conditions with tension that they relieve this where the barbiturates have failed.

They also have been found to be of use in some cases of mild insomnia, inducing sleep without the "hangover" which may occur with some of the barbiturates.

It would appear however, that it is necessary to do a considerable amount of research into these drugs, not only into the type of case which is helped, but also into the side effects and benefits over other drugs in current use.

The usual physical and psychological methods of treatment have been continued, but electro narcosis is now used in a very limited manner and then usually on schizophrenic patients who have failed to respond to coma treatment. Serpasil and largactil continue to be used but much less commonly now that the initial testing phase has been passed. Serpasil is of value in tension states while largactil has been shown to be most effective in controlling restlessness and agitation in the more psychotic conditions.

In addition to individual psychotherapy, Dr. Thorley and Dr. Spaul have developed group techniques among the patients under their care with considerable benefit to their patients.

The female occupation department remains in charge of Mrs. Herbert who has four assistants.

During the year the department has been redecorated and organised on slightly different lines in accordance with the wishes of the patients as a result of a vote.

Men and women now work together in all sections and a class has been started for dressmaking, repairs etc. which appears to have met quite a considerable need. Drawing and painting have been added to the activities of the pottery shop, while the usual arts and crafts are carried out in the other shops.

All occupations are now carried out with much closer regard to the wishes of the medical staff as a result of weekly meetings between the occupational therapy and medical staffs. At these conferences which are held on the wards, social workers connected with the cases under discussion and the Sisters and nursing staff in charge of the ward also attend, so that the patients' problems can be investigated from every aspect.

Mr. Edmonds remains in charge of the carpenter's shop with one assistant to help him, while the printing department in the same shop does all the printing for the group and also takes a few patients each day who are keen to learn this type of work.

During the year 34,725 attendances were made in the occupation shops under Mrs. Herbert, while 29,450 were made in the carpenter's shop (2,700 of these attendances were made by female patients).

The Educational Organiser, Mr. Robin Hull has resigned during the past month and it is felt that no new appointment should be made till after the summer, as many patients prefer outdoor activities during the fine weather.

Mr. Teasdale, the head remedial gymnast is still responsible, with one assistant for the physical training activities indoor and outdoor games and general recreation of the patients.

SOCIAL REHABILITATION UNIT

During the year 237 male and 111 female patients were admitted to the Unit, while 244 male and 98 female patients discharged. This makes a total of 348 patients admitted and 342 patients discharged. These numbers are included in the general admissions and discharges given elsewhere in the report.

The Social Rehabilitation Unit has continued to treat, in the main, patients with severe personality problems. The focus of interest has turned more and more to the treatment of the family as a whole. Most of these patients seem to be the product of disturbed homes and in many cases it is necessary to try and bring the whole family into treatment if any permanent results are to be obtained. Unfortunately, many of the patients have been brought up in orphanages, etc., and their feelings of rejection and isolation from society are probably best dealt with in a therapeutic community such as the Unit represents. Adverse social conditions such as those described frequently produce anti-social reactions and lead to delinquency and crime. It is for this reason that a certain number of cases are referred from the Courts—in the first six months of this year 22 of the 161 admissions were cases of this kind (that is 14%). The treatment of this kind of case is one of the most difficult problems in psychiatry as they do not respond to the various forms of physical treatment. The problem seems to have its roots in an adverse social environment and it is for this reason that the treatment programme and research studies are predominantly sociological in orientation.

The Nuffield-sponsored research team has continued its efforts and produced numerous interim reports. The coming year will be their peak year for producing finished products for publication, but several papers have already been submitted.

The Social Club at the Neuro-psychiatric department, St. George's Hospital, continues to fulfil a useful function for shy and schizoid ex-patients and also for those requiring continued supportive therapy after discharge.

TEACHING, RESEARCH, ETC.

In addition to the usual teaching activities during the year, viz. two series of lecture demonstrations to St. Thomas' Hospital undergraduates and the routine teaching of clinical assistants, a clinical meeting dealing with psychiatric problems in general practise was held on behalf of the British Post graduate Federation, while clinical meetings of the London County Medical Society and Surrey Inter-hospital Medical Society also took place during the year.

Dr. Maxwell Jones delivered one of the Maudsley Bequest lectures given under the auspices of the Royal Medico Psychological Association on Psychopathy and I also gave one on Obsessional Neuroses.

Throughout the year the usual case conferences have been held and these have been varied in that not only clinical cases have been discussed, but papers read on research work being undertaken by medical staff and films of medical interest shown.

Groups of students, viz. general nurses, occupational therapists and welfare officers have spent occasional days here during the year, when an intensive programme was arranged by the Sister Tutor to make the day a profitable one.

As usual a number of doctors from overseas have visited the hospital and included Dr. Guilmot (Belgium), Dr. Magnisson (Denmark), Drs. El Ghawaby, Askar and Abdel Messih (Egypt), Dr. Jokinen (Finland), Professor Baruk (France), Dr. Feldman (Israel), Dr. Foxton (Tasmania) and Dr. Hunt (U.S.A.). In addition, the Ambassador for Eire and Mr. O'Higgins, Minister of Health for Eire, visited the hospital to see administration and treatment carried out in a neurosis centre.

The Research Committee of the South West Metropolitan Regional Hospital Board has financed a scheme to be undertaken by Dr. Shaw to investigate the relationship of porphyria and neurotic symptoms. The work which will be undertaken on admissions to this and other hospitals, will be carried out in the hospital laboratory.

RESEARCH UNIT FOR DEAF CHILDREN

The work of this Unit at Belmont Hospital completed three years investigations at the end of March this year. During these three years the scheme had been financed from Research Funds of the South West Metropolitan Regional Board, but from the 1st April, 1956, the Unit is being financed from Exchequer funds and is now on a permanent basis as the work is regarded by the Regional Board to be of great importance.

In my last report I mentioned that a house in Sutton was to be opened and that the purchase of the house had been made possible through the generosity of the Nuffield Foundation. This should have been the Nuffield Provincial Hospitals Trust and I apologise for inadvertently naming the donors incorrectly. The house which was opened in August 1955 is being maintained jointly by the Nuffield Provincial Hospitals Trust and the Regional Board through research funds, and has on an average seven children in residence.

These children, because of emotional difficulties, require prolonged residence and some are already showing considerable improvement. One boy attends a deaf school in London each day, being taken and returned by coach, while a girl aged 5 who had no speech on admission to the house a few months ago, now has quite a large vocabulary and is to begin at a local nursery school next term, returning to the home each day.

The atmosphere is an extremely happy one with a foster mother in charge and two assistants to help, and the house is run on the lines of a large united family.

The Unit at Belmont is used for those children who are sent for diagnosis and assessment and their stay is very much shorter. This averages from three weeks to a month (in some cases of course, the duration is much longer), and while under observation, audiometry psychological tests and encephalography are carried out. In a few cases air replacements are also done.

At the same time it is felt that observation over a period of time is as important as the various tests. In this way, their reactions to play, social and educational activities are noted.

Some children are sent as out-patients for opinions and spend a day in the Unit. It is possible in many of these cases to decide if the child is deaf, mentally defective, maladjusted or a mixture of these conditions. Others however, have to be admitted for a further period of observation.

We still have difficulty in placing children when a diagnosis is reached, as the waiting lists for schools for maladjusted and deaf children are extremely long and the waiting period may extend up to two years. There is no doubt that more schools and teachers are necessary for this type of child, many of whom are still dealt with as mentally defective children, when in fact they are not.

During the year 42 children were admitted and 24 seen as out-patients. A paper on the work was published in the Journal of Mental Science in January of this year. So far 11 children have been accepted for schools of various kinds, of these, 5 are awaiting vacancies and 6 are now doing well at

school. I would like to pay a tribute to all the staff of the two Units for their care and patience in a most difficult task, and in particular, I must mention Miss Evans the teacher of the deaf, whose enthusiasm and skill have played a most important part in helping to obtain such promising results.

Other research work being undertaken by staff in the hospital :—

Dr. Minski, Dr. Desai and Miss Crouse	... ..	An investigation into the population of approved schools etc.
Dr. Minski and Dr. Niven	... ..	Emotional factors in essential Hypertension.
Dr. Shaw	... ..	Investigation into porphyria and mental disorder (grant from Regional Board research funds).
Dr. Shaw and Dr. Yorke-Moore		Neuro-psychiatric sequelæ of lightning accidents.
Dr. Thomas	... ..	A Clinical study of states of chronic excitement.
Dr. Thomas and Dr. Tarlo	... ..	Clinical survey of the use of tranquillizing agents in Psychiatry.
Dr. Evans and Dr. McCarthy		The E.E.G. in suspected space occupying lesions.
Dr. Evans and W. Webber	... ..	The design and use of an apparatus for photic stimulation with grouped flashes in the diagnosis of epilepsy.

PUBLICATIONS

Dr. Minski, Dr. Desai and Mrs. Ernest	... ..	An investigation into the aggressive psychopath (awaiting publication)—Psychological Monographs (U.S.A.).
M. E. Dawson, M. J. Evans H. Reed and Louis Minski		An investigation into children in an attempt to differentiate between mental defect and deafness. Jl. Mental Science. Jan. 1956.
Dr. W. W. Sargant	... ..	On Tranquillizers. Br. Med. Jl. May, 1956.
R. S. Ferguson, M.B., CH.B.	... ..	A clinical Trial of Reserpine in the Treatment of Anxiety. Jl. Mental Science Jan. 1956.
Maxwell Jones and R. N. Rapoport	... ..	Social and Administrative Psychiatry. Lancet (1955)2 ; 386.
Maxwell Jones	... ..	The Concept of a Therapeutic Community. American Jnl. of Psychiatry (1956) 122 : 647.
Maxwell Jones, B. A. Pomryn and E. Skellern	... ..	Work Therapy. Lancet (1956) 1 ; 343.
Maxwell Jones and R. A. Matthews		The Application of the Therapeutic Community Principle to a State Mental Health Programme. British Journal of Medical Psychology (1956) 29 ; 57.

Papers read :—

Dr. Desai	... ..	A preliminary Communication on Research in Psychopathic Personality (Research carried out by Dr. Minski, Dr. Desai and Mrs. Ernest) Committee of Professional Psychologists meeting at Belmont.
Dr. Desai	... ..	The Clinical Psychologist and Psychological Tests. At the British Psychological Annual Meeting, Manchester.

OUT-PATIENT WORK

Although no regular out-patient clinic is held here, during the year 896 patients were seen and 1,691 attendances made.

The following members of the full-time medical staff attend the following out-patient departments :—

Dr. Minski	...	...	...	St. George's Hospital, Hyde Park Corner, S.W.1.
Dr. Minski	...	...	...	Royal National Throat, Nose and Ear Hospital, Gray's Inn Road, W.C. (as reqd.).
Dr. Shaw	...	...	...	St. Helier Hospital (Psychosomatic Clinic).
Dr. Shaw	...	...	...	Dorking County Hospital.
Dr. Thorley	...	...	...	Wimbledon Hospital, S.W.
Dr. Samuel	...	...	...	London Hospital, E.1.

Psychotherapeutic sessions are held by the following members of the staff :—

Dr. N. Craske	...	...	Sutton & Cheam General Hospital.
Dr. B. F. McCarthy	...	...	Sutton & Cheam General Hospital.
Dr. M. Stewart	...	...	St. George's Hospital, S.W.1.
Dr. D. Thomas	...	...	St. George's Hospital, S.W.1.
Dr. G. F. Spaul	...	...	St. George's Hospital, S.W.1.
Dr. B. Pomryn	...	...	Hammersmith and Westminster Hospitals.

In addition, Dr. Spaul acts as clinical assistant to Dr. Garmany in his Child Guidance Clinic attached to the Westminster Hospital.

DEPARTMENT OF ELECTROPHYSIOLOGY

Dr. Evans remains in charge of this department, doing five sessions a week with Dr. McCarthy of the Registrar's grade to assist him.

Dr. McCarthy divides his time between this department and clinical psychiatry.

Mrs. Dawson is still engaged on research work in connection with children from the Deaf Unit and also those from Lingfield Colony, and receives her salary from Research Funds of the Regional Board.

The technical staff consists of a technician and a recordist.

During the year, 134 in-patients were seen on whom 183 recordings were carried out, while 1,284 out-patients were seen on whom 1,561 recordings were made. The total number of new patients seen in the year was therefore 1,418 on whom 1,744 recordings were carried out.

The usual techniques already mentioned are still in use, while in a few cases sphenoidal electrodes are used. In this way direct contact with the sphenoidal lobes of the brain is made.

Dr. Evans gave a course of lecture demonstrations in clinical encephalography during the year under the auspices of the Surrey Inter-hospitals Psychiatric Association.

PSYCHOLOGICAL DEPARTMENT

The department continues under the direction of Dr. Desai which has one technical assistant.

During the year 833 patients were tested, in groups or individually, for a preliminary assessment of intelligence and verbal attainments. Re-tests for these functions and group tests of other functions were given to 75 patients.

In 690 interviews, 239 patients were seen individually for intensive investigations in connection with differential diagnosis, assessments of personality, indications for types of treatment, vocational rehabilitation, assessments of intellectual impairment, etc. Of these 148 were referred primarily for differential diagnosis and personality assessment, 57 for appraisals of intellectual potential and impairment and 11 for vocational rehabilitation, while 18 patients were seen primarily for research.

35 patients from Out-patient clinics, where our psychiatrists attend, were also referred to the department.

Mr. Strauss, who continues his work mainly in the Social Rehabilitation Unit, dealt with 79 patients in groups in connection with vocational and related problems, while Dr. Desai collaborated with psychiatrists in psychotherapy and re-education in relation to 11 patients.

During the year Mrs. Ernest left to take up a senior appointment at Westminster Hospital and Miss Crouse has taken her place to assist with research, the salary being provided by the Regional Board from research funds.

The research on Psychopathic Personality was completed and the findings will be published in the near future. It is hoped to use some of the findings for research with adolescent delinquents.

The department continues to help in the selection of student nurses and in the training of nurses.

As usual, clinical psychology students from the Tavistock Clinic spent a month in the department as part of their training. One-day tutorial visits were paid to the department by students doing Educational and Clinical Psychology courses. A meeting of the Adult Section of the Committee of Professional Psychologists was held in the hospital to hear about the work of the department.

FOLLOW-UP

As usual, follow-up letters have been sent to all patients discharged from hospital at the end of three months, six months, twelve months, eighteen months and two years.

The position at the end of two years after discharge from hospital was as follows :—

	Male	Female
Symptom free	12	24
Symptoms present but working ...	44	47
Unable to work	15	10
In Mental Hospitals	2	4
Deaths	4	3
Re-admissions here	29	35
No replies	67	68
Not followed up	53	96
Gone away	33	27
	259	314

It will be seen that out of 573 patients under review a total of 149 were not followed up. The reasons have been given in previous reports and are mainly two in number ; either the patient is hostile to the hospital and refuses to co-operate, or finds the memory of his illness painful to him and for this reason does not wish to be reminded of it.

It will be seen that 53 per cent. of the males and 58 per cent. of the females who replied were symptom free or working, while 11 per cent. of the males and 11 per cent. of the females were re-admitted here.

These figures compare with 57 per cent. of the males and 51 per cent. of the females given in the last report who were symptom free or working, and 11 per cent. of both sexes re-admitted here.

As has been previously stated these figures show little variation from year to year and appear to represent the average.

The figures at the end of one year after discharge were 66 per cent. of the males and 57 per cent. of the females who were symptom free or working. The average after one year has been found to be around 60 per cent. and there would appear to be the same decline to about 50 to 55 per cent. on an average after two years.

The follow-up system does prove of value, not only to Doctors in assessing the results of treatment, but also to patients in providing an anchor in the early days after discharge and in helping to prevent relapses when they feel a return of minor neurotic symptoms. Such patients can be put in touch with an adjacent psychiatric out-patient department where prompt treatment can often avoid a further period in hospital.

SOCIAL WORK

There have been many changes in this department during the year which has had a very unsettled period.

Miss Craggs who had been in ill health for some time died in April this year. She had been a member of the staff for five years and the detailed knowledge which she had of the difficult problems of her patients as a result of years of experience will not easily be replaced. Miss Craggs will be greatly missed and we offer our sympathy to her relatives in their loss.

Miss Wood was granted leave of absence in August 1955 to take the Psychiatric Social Workers' Course at Manchester, and as a result, Miss Gaston, who took up duty here in September 1955, was the only permanent Social Worker on the staff for some time. The two vacancies were filled by locums until Miss Bainbridge returned here from the Westminster Hospital in June 1956, having been re-appointed to this hospital. Miss Wood's post is being filled by a locum until her return in October of this year.

While at the Westminster Hospital, Miss Bainbridge ran a small group (usually of five patients), to teach patients muscular relaxation where anxiety and tension are marked features of their illnesses. The results were most encouraging and Miss Bainbridge is starting a similar class at this hospital.

It is still a policy of the department on the female side, to interview all new patients as soon as possible after admission, as this early contact provides an opportunity for the patient to discuss any immediate problems and also paves the way for more intensive social work if this is required by the doctor.

The problems presented by patients are still numerous, housing, sickness benefit, national assistance and pensions still being predominant.

Re-settlement of patients remains one of the major problems for the social workers, and the co-operation of the Disablement Re-settlement Officers of the Ministry of Labour is greatly appreciated. It is felt however, that three visits a week is insufficient to give full consideration to each case with all its problems.

An interesting development is the placing of patients in unpaid work while they are still in hospital, and for this we are grateful for the understanding of local employers. In this way a patient learns to tackle the problem of employment under normal conditions while he is living in a sheltered environment and has the help of his doctor. It has proved of great value in finally settling him in the outside world again.

Once again, we have to thank the Women's Voluntary Services, British Red Cross, local Clergy, Lest We Forget, Not Forgotten and Ex Services Associations and other voluntary bodies for their sympathetic understanding of our patients and for their practical help.

I should like to thank Mrs. Deer, Chairman of the Hospital Management Committee, for her continued help and co-operation during the year.

I should also like to express my thanks to the members of the Management Committee for their support and also the members and officers of the Regional Hospital Board.

Finally to my colleagues in the hospital, both medical and lay, I am grateful for their loyalty, help and support during the year.

LOUIS MINSKI, M.D., F.R.C.P., D.P.M.

Physician Superintendent.

